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FORM D-2

REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK	FOR OFFICE USE ONLY
Quarterly Report: (Check one:) 1st 2 nd 3 rd 4 th Final Report (Fund balance on Line E must be \$0)	
Amendment of the Report Indicated Above	
ddress of Political Committee: CHECK FOR ADDRESS CHANGE	COMMITTEE ID #
istor Evonton, IL (0202	36468

Full name and complete mailing address of Political Committee: CHECK FOR ADDRESS CHANGE COMMITTE	EID#	
Re12408	/	
Re14 FOR 8		
235 CISTU EVNIFMILL (0202) 56768		
E-mail address: CHECK FOR E-MAIL ADDRESS CHANGE		
REPORTING PERIOD CASH AVAILABLE AT BEGINNING ALL POLITICAL COMMITTEES RETURN TO:		
	2329 S MacARTHUR BLVD OR JAMES R THOMPSON CENTER	
SPRINGFIELD, IL 62704-4503 100 W RANDOLPH, STE 1 CHICAGO, IL 60601-3232		
FROM THRU Repeat this amount in SECTION D, Line (A)		
SECTION A — RECEIPTS SECTION B — EXPENDITURES		
1. Individual Contributions 6. Transfers Out	(C-)	
a. Itemized (from Schedule A): \$		
b. Not-Itemized: \$(1b) b. Not-Itemized: \$	(6b)	
2. Transfers In a. Itemized (from Schedule A): \$(2a) a. Itemized (from Schedule B): \$	(7a)	
a. Itemized (from Schedule A): \$(2a) a. Itemized (from Schedule B): \$ b. Not-Itemized: \$ (2b) b. Not-Itemized: \$		
	(/0/	
3. Loans Received a. Itemized (from Schedule A): \$(3a) a. Itemized (from Schedule B): \$	(8a)	
b. Not-Itemized \$ (3b) b. Not-Itemized \$	(8b)	
4. Other Receipts 9. Independent Expenditures	_(/	
a. Itemized (from Schedule A): \$(4a) a. Itemized (from Schedule B-9): \$	(9a)	
b. Not-Itemized \$(4b) b. Not-Itemized \$	(9b)	
TOTAL RECEIPTS (1a thru 4b) \$(TR) TOTAL EXPENDITURES (6a thru 9b)\$	(TE)	
***************************************	****	
5. In-Kind Contributions SECTION C — DEBTS AND OBLIGATIONS (Include previously reported unpaid debts)		
5. In-Kind Contributions a. Itemized (from Schedule I): \$(5a) 10. a. Itemized (from Schedule C): \$	(10a)	
b. Not-Itemized \$ (5b) b. Not-Itemized \$	(10b)	
TOTAL IN-KIND (5a + 5b) \$ (TI) TOTAL DEBTS & OBLIGATIONS \$	_(/	
**************************************	_ *****	
Name and address of person submitting this report if other SECTION D — CASH BALANCE		
than the committee's Chair or Treasurer: Cash available at beginning of reporting period:	(A)	
Total Receipts from Section A (TR): \$		
Total Expenditures from Section B (TE): \$	(D)	
Funds available at close of		
reporting period (C minus D): \$	(E)	
Investments total (if applicable): \$	_ (F)	
VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND ITALEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED.		

ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$ 1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE

